

POSITION	INITIAL 3	ID NO.	DATE
<b>FEES DETERMINATION</b>			
<b>O.I.P.E. CLASSIFIER</b>	REO		3/21/01
<b>FORMALITY REVIEW</b>	NN	778	7/5/01
<b>RESPONSE FORMALITY REVIEW</b>	NN	778	1/9/02

## INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 — (Through numeral)... Canceled  
 ÷ ..... Restricted

N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Final Original	Date
1	1	7/3/02
2	2	7/12/02
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45	✓	
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50	✓	

Claim	Final Original	Date
51	1	7/3/02
52		7/12/02
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Claim	Final Original	Date
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If more than 150 claims or 10 actions  
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